24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
American Principles SuperPAC	C C00527804
Check If 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Clear Channel Outdoor	ate M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 5800 77 Court	mount
City State Zip Code	
Miami FL 33166	6125.00 Insaction ID : SE.4221
Purpose of Expenditure media placement-billboards Category/ Type Office S	Sought: House State: FL Senate District: 22
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
Adam Hasner Check C	One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	ate
Mailing Address	
	mount
City State Zip Code	
Purpose of Expenditure Category/ Type Office S	Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Check (One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	ement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	6125.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	6125.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Nancy H. Watkins [Electronically Filed] Date 10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	